

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 23, 2007 08:00 A
Secretary of State**

DOCUMENT # P01000034369

1. Entity Name
RKO TRUCKING, INCORPORATED



Principal Place of Business
2110 CASSINGHAM CIRCLE
OCOE, FL 34761

Mailing Address
2110 CASSINGHAM CIRCLE
OCOE, FL 34761



04082007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3048105

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

OUTAR, RAJENDRA K
2110 CASSINGHAM CIRCLE
OCOE, FL 34761

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	OUTAR, RAJENDRA
STREET ADDRESS	2110 CASSINGHAM CIRCLE
CITY-ST-ZIP	OCOE, FL 34761
TITLE	V
NAME	OUTER, BHAWATI
STREET ADDRESS	2110 CASSINGHAM CIRCLE
CITY-ST-ZIP	OCOE, FL 34761
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000726712
05/04/07-80018-018 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bhawanti I. Outar (Bhawanti I. Outar) 4-07-07 497
466-6246

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #